

ROCHESTER

----At/2 lie.lola

FIRST CLASS CITY . FIRST CLASS SERVICE



ETHICS ORDINANCE
DISCLOSURE FORM
201 4th

JUDY SCHERR, CMC City Clerk 201 4th Street SE, Room 135 Rochester, MN 55904-3742 (507) 328-2900 FAX 11(507) 328-2901

NAME: EDWARD L. COHEN	(507) 328 FAX 11(507)
ADDRESS: 903 6TH AVE SW	
CITY, STATE, ZIP CODE ROCHESTER	MN 55902

1. What is the name of your position, title or job title with the municipality or City?

Chair, Energy Commission

- 2. Is this an employed appointed or elected position?
- 3. What is the name of the City department in which you are employed, or City board, commission or elected body on which you serve?

See #1

4. \hen were you hired, appointed or elected to this position?

2012

For questions 5, 6 and 7, the word "interest" means a substantial financial interest tlu-ough your ownership of stocks, bonds, notes or other securities. The word "interest" also includes an interest arising from blood, marriage or other personal relationships or close business or political association. The phrase "doing business" means engaged in any contractual relationship with the City or making application for such relationship or for any relief or benefit available from the City including, but not limited to, variance, permit, license or plat approval.

(SEE REVERSE SIDE)

Ethics Ordinance Disclosure Form Page Two

5,	Please list your interests in real propelly within the City	of Rochester, other than y	our
	homestead. Complete on a separate page if necessary.	\$	

None

6. Please list any interests you have in a business doing business with the City.

None

7. Please list any interest you have in any business located \Vithin, or doing business in, the City.

None

8. List any and all employment.

Retired

9. List any and all community, clvlc, or nonprofit organization of which you are a member. If you also serve in any such organization in a leadership or decision-making capacity, please note that capacity. (Please attach a sheet if additional space is needed.)

Historic Southwest Neighborhood Association-Vice President

I hereby certify that the above information is complete and accurate.

Selwad L Cohen

Data

Please mail completed and signed form to: Judy Scherr, CMC, City Clerk, City Hall, 201 4th Street SE, Room 135 Rochester, MN 55904-3742 05-16-13